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JUNE 1992

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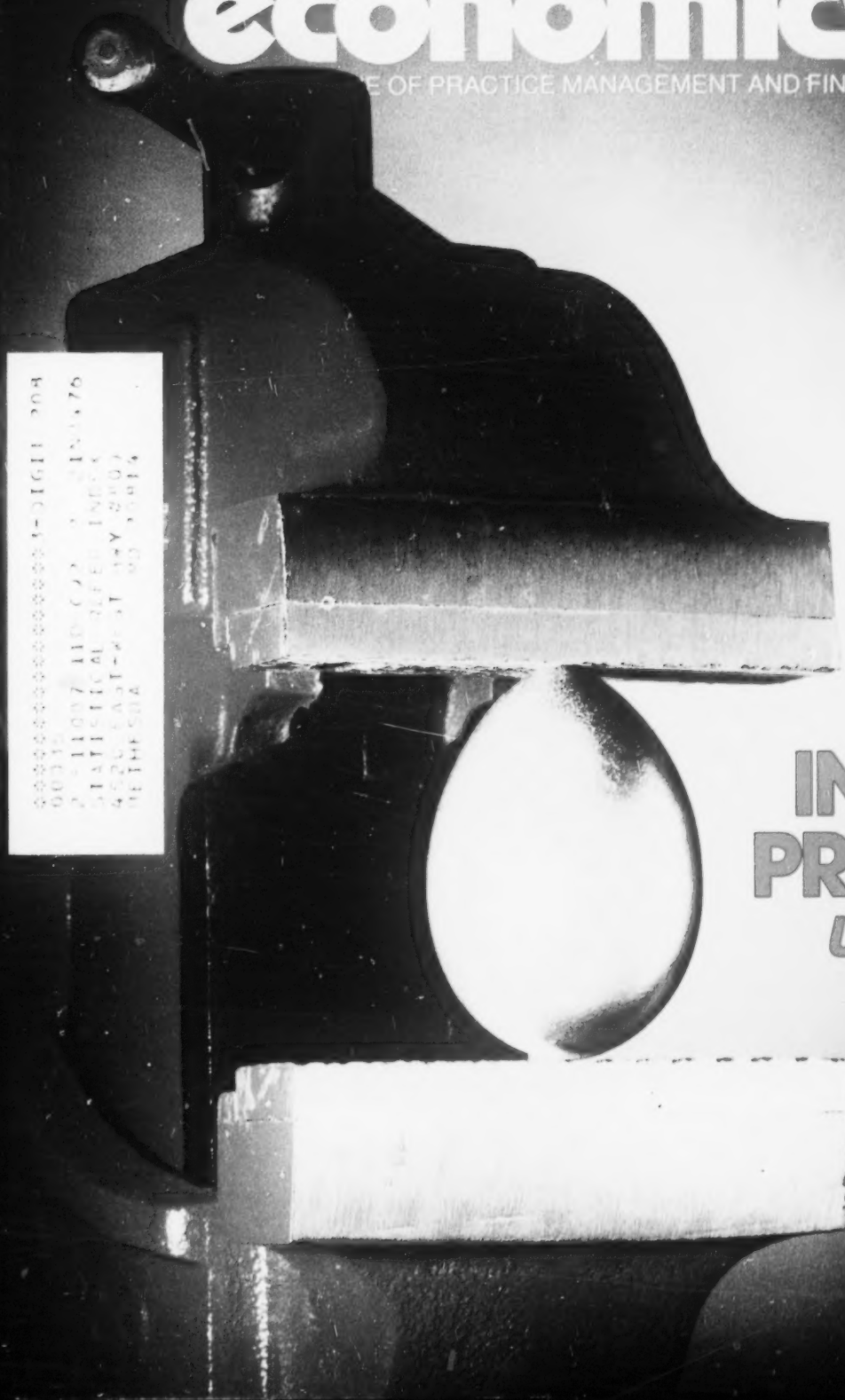

INCOME PRESSURE

Use it wisely.

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MEMO FROM THE EDITOR

Get thee to a convention!

As I listened to the management presentations at AAHA's conference in New Orleans, I began to wish that I could bring all 39,000-plus of you into the room—or bottle the presentations for distribution far and wide. They were that good, and that invigorating. But the fact is, I *can't* bottle them in print. As the refrain goes, "you really had to be there." I can, however, encourage you to make the time for at least one management program every year.

As a magazine editor, I hate to admit it, but the sights, sounds, and interaction at a "live" presentation do pump up the adrenaline and shake loose the cobwebs. Of course, there is the danger that you'll wander into a snoozer and wish you hadn't taken my advice, but in all of the practice management seminars I've attended, I've rarely encountered such a thing. For a relatively small profession, you have access to some great speakers, whose presentations both inspire and educate.

Despite my travels, and the excellence of many of the seminars I've attended, I think the best management program takes place at the Central Veterinary Conference (CVC) in Kansas City. Yes, I'm biased, but with good reason. The CVC features a golden lineup of VETERINARY ECONOMICS' top contributors—Ross Clark, Owen McCafferty, Marty Becker, Don Dooley, James Wilson, Cynthia Wutchiett, and Ray Russell. Their energy and commitment to professional practice management is infectious, and their willingness to address the topics that cause you the most grief is unmatched.

Good seminars—sponsored by organizations you trust—can boost your energy level, help you solve some of the nagging problems you face, introduce you to new ideas, and put you in contact with colleagues who are as ready as you are to bring their practices to a new level of success. I'd say don't miss any opportunity for such a seminar—just make sure one of them is the CVC. This year's conference takes place September 26-30, and you'll find more information on page 72.

See you in Kansas City!

Becky Turner

Rebecca R. Turner

veterinary economics

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to politely explain that, "Dr. Goodvet is covering our emergencies in the doctor's absence. Would you like me to help you to set up an appointment with his office?"

Also ask your receptionist to keep track of every client referred to your colleague. When you return from your trip, call Dr. Goodvet, and ask about each case; then call each client to follow up. Your genuine concern will alleviate any doubts your clients may have had about your unavailability.

Anchors aweigh

The only step left is to pack your bags, lock the house, and have a safe and relaxing trip. Don't worry about a thing, because you've covered all of your bases, and your well-organized, well-managed practice is in very good hands. (For more on starting or building a relief practice, see "The Business of Being a Relief Veterinarian," in the December 1990 issue.) ■

WHAT PRICE RELIEF?

How much do practitioners pay relief doctors? Below are the results of a survey conducted by Owen McCafferty, CPA, and VETERINARY ECONOMICS. (For more on the survey, see the January issue.)

Most of the respondents pay their relief doctors as independent contractors, so the pay shown here does not include payroll taxes. McCafferty notes, however, that the minimum figure appears to reflect payments for doctors with employee status; payments at the high end are for true independent contractors with substantial experience.

AVERAGE STATISTICS FOR RELIEF DOCTORS

	Average	Minimum	Maximum
Pay per hour	$21.35	$14.00	$27.00
Pay as % of practice gross	3.99%	0.48%	7.5%
Pay per year	$10,787.22	$600.00	$19,656.00
Number of hours worked per year	420.8	24.0	728.0
Number of relief doctors per practice	0.95	0.25	1.0

The survey respondents say that, on average, relief-doctor pay accounts for 3.99 percent of gross practice income, which reflects McCafferty's own findings in his clients' veterinary practices. He notes that most of the doctors who engage relief veterinarians are in one- or two-person practices, and that as the practice grows, the probability of employing relief veterinarians diminishes.

In some situations, McCafferty notes, the owner chooses to close the practice rather than hire a relief doctor. Therefore, relief pay, as a percentage of gross, fell as low as 0.48 percent for some respondents. In those practices willing to pay a premium in order to provide coverage, relief payments rose as high as 7.5 percent of gross practice income.

Based on the survey findings, McCafferty notes that practitioners today appear to be more cautious in hiring associates, opting instead to use experienced relief doctors to help with the workload until the practice can commit to a full-time employee. The findings also indicate that the need for experienced relief doctors spans well beyond coverage for vacation or sick days. A relief doctor who provides experience to a practice can, in many cases, maintain a higher income than he or she can as an employed doctor.

McCafferty's conclusion: that the classification "relief doctor" is a viable and continually growing segment of practice. Through his annual surveys, McCafferty will continue to monitor the changes in relief practice; look for his reports early next year.